



# Health Worker Motivation in Ghana: The Role of Non-Financial Incentives. A Case Study of Accident and Emergency Department of Komfo Anokye Teaching Hospital

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#### ABSTRACT:

The success of every health care system greatly depends on the extent to which health workers are motivated. Over the past years, many health care organisations in Ghana have heavily relied on financial incentives as the major way of motivating health care staff. In spite of these, morale of health workers in Ghana continues to decline. Recent studies have shown that to address the problem of health worker constraints, health care organisations need to move beyond the usual traditional human resource management approaches that apply financial incentives to motivate and retain health workers. Instead, health care managers have been urged to consider using non-financial incentives to motivate and retain health workers. This study was therefore conducted to examine the role of non-financial incentives on health worker morale incentives on health worker were sampled for this study. Data gathered were analyzed using descriptive statistical tools such as bar graphs and pie charts. The findings of this study confirmed other findings that the state of health worker morale in Ghana is low. The study further revealed that health workers considered the working environment as the highest and most important non-financial motivator. This was followed by training and career development; provision of staff accommodation; job security; promotion, growth and development; recognition, praise and acknowledgment. These findings also confirmed other findings that non-financial incentives play a critical role in motivating health workers in Ghana.

The study therefore recommended that non-financial incentives should be given much priority when motivating health workers in Ghana. The study further recommended for an improvement in the physical and social environment of health care organizations as well as providing enough training and career development programmes for health workers.

**Keywords:** Motivation, Non-financial incentives, Health worker motivation, incentives

#### **INTRODUCTION**

Employee motivation is essential for effective organisational performance. It is the backbone of every successful organization [29, 24]. Ojakaa et.al. [68] have defined employee motivation as the extent to which an individual employee willingly applies and maintains efforts towards the attainment of an organisational goal. Motivating employees requires stimulating their individual interest or causing them to have a desire to perform a task [5]. However, getting employees to do their best especially in challenging moments is one of the most difficult tasks for managers. Understanding what adequately motivates human beings is an age-long

puzzle [65]. Many scholars and great thinkers such as Aristotle, Adam Smith, Abraham Maslow, Sigmund Freud among others have attempted to explain the reasons behind people's actions. Yet, the in-depth understanding of why people do what they do is still being considered as a difficult task for most managers [47, 68].

However, the impact of health worker motivation cannot be overemphasized. There is evidence to suggest that healthcare quality greatly depends on highly motivated healthcare workers [52]. According to a World Health Report [81], health worker motivation is one of the key ways to





improve health sector performance particularly in Sub-Saharan Africa.

In spite of the important role health worker motivation plays in the delivery of quality healthcare, most studies [5, 6, 70, 83, ] in this area continue to reveal that low health worker motivation is contributing largely to the poor health outcome indicators in most Sub-Saharan African countries. This has also been identified as the second most important health sector problem in Africa [11, 23, 58].

Recent approach to health worker motivation has been heavily criticized as unproductive and unsustainable. Many healthcare organisations focus on financial incentives as the only means to effectively motivate health workers [22]. However, evidence and experience suggest that any exhaustive strategy to boost health worker motivation in Sub-Saharan Africa has to comprise a blend of financial and non-financial incentives [58]. A review of literature [5, 6, 23, 53, 68] looking at health worker motivation reveals the limitations of financial incentives on health worker motivation and also discusses the importance of non-financial incentives. For instance, a study conducted in South Africa by Kotzee & Couper [44], revealed that due to lack of training opportunities, most doctors will not accept postings to some districts in the country. The study found that financial incentives were not adequate enough to motivate doctors to accept postings to the rural areas. This study was therefore conducted to examine the critical role played by non-financial incentives on health worker motivation in Ghana.

The study addressed the following questions:

- 1. What is the state of health worker morale?
- 2. What are the factors affecting health worker motivation?
- 3. What impact do non-financial incentives have on health worker morale?

#### **METHODOLOGY**

The study was carried out in the Komfo Anokye Teaching Hospital which is also Ghana's second largest hospital. A total of 150 health workers were sampled and grouped into six strata (Doctors, 20, Nursing staff, 80, Biomedical 8, Pharmacist Scientist. and Pharmacy Technicians, 7, Radiographers 7, Supporting Staff, 30) using stratified sampling. Information was obtained on a pre-tested questionnaire designed for the above. The self-administered questionnaire for this study consisted of twentytwo (22) closed-ended questions. The questions were divided into three main parts. The first section was designed to gather demographic data of the respondents. The second section focused on identifying the extent to which certain motivators' (mainly non-financial incentives) impacts on health worker morale. The final section of the questionnaire was also designed to identify the level of motivation, satisfaction as well as the various factors that affect health workers. The design of the questionnaire was generally based on various literature reviewed for this study.

The data gathered were screened for possible errors and omission. This was then coded and grouped into limited number of categories. Microsoft Excel Software was used in analyzing the data. The analysis was grouped into three main segments. The first segment analyzed the demographic data of the respondents. This includes age, gender, professional background, number of years worked for the hospital and educational background. The second segment also analyzed the extent to which certain key motivators or incentives impacts on health worker morale. The final segment of the questionnaire also focused on analyzing the level of health worker motivation.

## RESULTS AND DISCUSSION Demographic information

Out of the 150 health workers sampled for the study, 127 responded to the self-administered questionnaire giving a response rate of 85%.





Sixteen (16) of the respondents representing 12.6% were doctors, 72 (56.7%) were nurses and health assistants, 7 (5.5%) were biomedical scientist, 4 (3.15%) were pharmacist and pharmacy technicians, 5 (3.94%)radiographers and technical officers and 23 respondents representing 18.11% also constituted support staff. In all 36% of the respondents were males whilst 64% were females. In terms of educational background, 12.6% of the respondents have had education up to a high school level. Respondents with diploma and degree constituted 33.9% each whilst 19.7% have also had postgraduate education.

### Key motivators which impacts on health worker morale

The study was divided into 2 parts. The first part specifically looked at the extent to which certain key non-financial motivators impacts on health worker morale and the second part also looked at the level of health worker morale.

The study grouped the non-financial motivators into six themes namely; training and career development; working environment; promotion, growth and development; recognition, praise and acknowledgement; security job and accommodation. From the findings, working environment was considered the highest and most important non-financial motivator for health workers. Eighty-six percent (86%) of the total respondents found this as either highly motivating or motivating. Training and career development followed as the next most important non-financial motivator for health workers with 80% of the respondents indicating they were either highly motivated or motivated. Staff accommodation was also considered by health workers as the third important non-financial most motivator. recording 74% of the total respondents. The study again found that, 66% of the respondents rated job security as the fourth most important motivator. This was followed by promotion, growth and development with 65% of the respondents indicating they were motivated by this factor. Recognition, praise and acknowledgements also ranked as the sixth most important health worker motivator with 57% of the respondents indicating they were motivated by this factor. The findings of this study therefore confirm the pivotal role of non-financial incentives in motivating health workers.

The study also found that age, gender and professional background of respondents influences the extent to which they were motivated by certain non-financial motivators. For instance it was revealed in the study that health workers within the age bracket of 18-29 years were mostly (84%) motivated by training and career development. This was a major factor for their choice of working in a particular department within the hospital. For instance, most of the young respondents indicated that they have chosen to work in the Accident and Emergency because the hospital's policy of granting them study leave to pursue further studies. However, none of the older respondents particularly those who were 60 years and above indicated they were motivated by this factor. Therefore the study found that the older the health worker, the lesser their extent of motivation by training and career development. Again, health workers within the age range of 30-39 years and 40-49 years were very much motivated by promotion, growth and development. The study further reveals that young health workers within the age brackets of 18-29 years and 30-39 years were very motivated by the provision of staff accommodation with 88% and 89% respectively indicating they were motivated. However, those health workers aged 50-59 years and 60 years above were least motivated by provision of staff accommodation. This was due to the fact that unlike the younger respondents, the older respondents may have acquired their personal accommodation by that age so motivating them with what they already have may not be effective. The study generally also found that young health workers were much motivated by training and career development as well as staff accommodation. In contrast, older





health care workers were motivated by recognition, praise and acknowledgement.

There was also a relationship between the gender of respondents and the extent to which they were motivated by certain non-financial motivators. For instance, it was found that most male health workers (62%) were motivated by training and career development compared to 44% of the female respondents. It was also found that most (74%) female health workers were much motivated by recognition, praise and acknowledgement than the male respondents (28%).

It was again found that different cadres of health professionals valued the motivators differently. For instance, findings of this study show that doctors (94%) and nurses and health assistants (88%) were much motivated by working environment than other professional groups such as support staff (35%) and pharmacists (25%). The study found that all cadres of health professionals were largely motivated by promotion, growth and development. However, most doctors were least motivated by job security although 83% of the support staff respondents indicated this factor greatly motivates them.

This study has found that although financial rewards are great source of health worker motivation, non-financial incentives such as the working environment; training and career development; job security; promotion, growth and development; recognition, praise and acknowledgement; and staff accommodation were very important source of health worker motivation. This study again reveals that the extent to which health workers are motivated by these factors greatly depends on their gender, age and profession.

The final part of the study analyzes the various factors affecting health worker motivation and satisfaction as well as the state of health worker morale. It was revealed that most (62%) health

workers were dissatisfied with the incentives provided by the organisation. The findings show that doctors (88%) and nurses and health assistants (64%) were largely dissatisfied with the incentives provided by management of the organisation. The study also found that most (70%) health workers were emotionally and physically drained at the end of each working day. Nurses and health assistants (93%) and doctors (75%) were found to be the highest professional group who felt emotionally and physically drained at the end of each working day. Most (55%) health workers disagreed that they have adequate tools, equipment and space to enable them perform effectively. It was revealed that doctors (87%), biomedical scientist (86%) and nurses and health assistants (64%) were dissatisfied with the tools, equipment and space provided by the organisation to enable them perform effectively. Health workers were generally satisfied with promotions in the organisation with 52% indicating they were satisfied. However, only few (9%) support staff respondents agreed that promotions were done equitably, fairly timely. Sixty-one percent (61%) respondents neither agreed nor disagreed that they work in a safe and better environment. The study also found that health workers were largely dissatisfied with the opportunities being provided by the organisation for learning and development. Sixty-one percent (61%) of the respondents indicated that they were not provided with enough learning and development opportunities. Biomedical scientists (100%) and radiographer and technical officer respondents (80%) were the most dissatisfied with the learning and development opportunities in the organisation. Wages and salaries play an important role in raising the morale of health workers. However, this study discovered that most (87%) support staff respondents were not satisfied with their present salary. Overall, half (50%) of all health workers were dissatisfied with their job confirming that the state of health worker morale in Ghana is low.





### Discussion of Findings Linked to the Literature Review

Comparison of the study findings to the various literature reviewed gives a deeper understanding into the role of non-financial incentives on health worker motivation. For instance, this study found that the working environment is an important non-financial motivator for health workers. Job security was also ranked the fourth most important non-financial motivator for health workers. These findings were contrary to Herzberg's hygiene factor theory of motivation which argues that hygiene factor such the working environment and job security does not provide motivation. Herzberg [33] had argued that hygiene factors were not motivators although they were necessary to prevent dissatisfaction. However, the findings of this study have confirmed that some hygiene factors can also serve as a great source of motivation. This study does not also support Maslow's hierarchy of need theory which argues that human needs are in hierarchical order. The findings of this study showed that the needs of health workers are not necessarily hierarchal as Maslow had portrayed in his study.

The study also found that training and career development was ranked second, promotion, growth and development was fifth and recognition, praise and acknowledgement was also ranked the sixth most important motivator for health workers. These findings confirm Herzberg's motivation hygiene theory model which contends that motivation is realized when employees have the opportunity to advance and grow. Herzberg [33] argued that recognizing employees' efforts bring about job satisfaction. The findings again support Alderfer's ERG theory which argues that offering employees the opportunity to grow and recognizing their efforts directly results in motivation.

The study findings also confirm other findings [6, 22, 44, 58, 64] that health workers are motivated by working environment; training and career

development; accommodation; job security; promotion, growth and development; recognition, praise and acknowledgement. It was also found in the study that financial incentives are also a great source of motivation to health workers. These findings support the findings of Mathauer & Imhoff, [58] that any effective strategy to maximize health worker motivation in developing countries should involve a mix of financial and non-financial incentives.

The findings of this study also provide support for Mutale et.al., [64] who observed that young health care workers were much motivated by training and career development rather than simply raising their wages and salaries. As confirmed in this study, 84% of all health workers aged between 18-29 years were motivated by training and career development. It was again found that young health care professionals between the ages of 18-29 and 30-39 years were much (88% and 89% respectively) motivated by accommodation. This finding also confirms the study findings of Agyapong et.al [6] who had revealed that due to the difficulty for young and newly qualified health care professionals in getting accommodation, most of them accept postings to health care institutions which offers them staff accommodation. This study further reveals that the provision of staff accommodation has become a major motivator for attracting and retaining young health care personnel. The study has also confirmed other studies [4, 6, 22, 58, 64] that different health care professionals value the motivators differently. For instance, the study findings confirmed the findings of Dambisya, [22] who revealed that doctors and nurses were much motivated by working environment than other health care professionals.

This study revealed that most (62%) health workers were dissatisfied with the incentives provided by the health care organisation. Doctors and Nurses were found to be highly dissatisfied with the incentives provided. The findings of this study provide support for Dambisya, [22] who





also found that incentives provided for most doctors and nurses in Mozambique, Namibia and Zimbabwe were not motivating enough. In another study conducted by Adjei-Appiah [4] it was found that most doctors and nurses in Ghana were emotionally and physically stressed. This study found that the doctor-patient ratio and nurse-patient ratio in Ghana were too wide making it nearly unbearable for health workers to cope with the stress. The findings of Adjei-Appiah, [4] also provide confirmation to the findings of this study which reveals that 93% of all nurses and health assistants and 75% of the doctor respondents were emotionally and physically drained at the end of each working day. Also, with only 26% of the support staff respondents (mainly non-clinical health workers) indicating they were physically and emotionally stressed, this study confirms the findings [22, 64] that most clinical health workers were physically and emotional stressed than the non-clinical health workers.

Although many studies [4, 6, 11] have revealed that health workers in Ghana were not satisfied with their salary, the findings of this study had proved otherwise. For instance, only 37% of all health workers had indicated they were not satisfied with their salary except for support staff respondents (83%) who had indicated they were dissatisfied with their salary. On a whole, the level of health worker dissatisfaction in Ghana was found to be higher (50%) than the findings of Amoako et.al., [11]. This implies that the level of health worker morale in Ghana has gone further down, signaling a failure in the motivational policies by the Government of Ghana and health care policy makers.

Overall, this study found that the state of health worker morale in Ghana is low. These findings have also confirmed other studies [11, 68, 70]. The study also identified that, inadequate tools and equipment; lack of training and development opportunities; heavy workload leading to emotional and physical stress; delayed and unfair promotions were the major factors affecting the

morale of health workers. The study further identified that, non-financial incentives such as working environment; training and career development; accommodation; job security; promotion, growth and development; and recognition, praise and acknowledgement were the key motivators required by both the government of Ghana and other health care managers to raise the morale of health workers. Financial rewards were however identified as an important motivator for health workers. These findings therefore support other findings [22, 58] that any exhaustive strategy to boost health worker motivation in Ghana has to comprise a blend of financial and non-financial incentives.

#### Conclusion

Low health worker motivation continues to threaten the effective delivery of health care in Ghana [68]. Many studies [22, 44, 58, 68] have recommended that health care organizations need to move beyond the usual traditional human resource management approaches that apply financial incentives to motivate and retain workers. This study was therefore conducted to identify the role of non-financial incentives on health worker motivation. The main aim of the study was to critically analyze the impact of nonfinancial incentives on health worker motivation and how this could improve health care delivery in Ghana. To achieve this aim, the following objectives were outlined: First, to assess the state of health worker morale in Ghana. Secondly, to find those factors affecting health worker motivation in Ghana. The third objective was to find out why the implementations of several financial incentive packages have not been able to fully address the problem of health worker motivation in Ghana. The last objective was to also identify how non-financial incentives could help address the issue of health worker motivation in Ghana.

The findings of this study have confirmed other findings [11, 58, 68] that the state of health worker morale in Ghana is low. This study has





further revealed that inadequate tools, equipment and space; physical and emotional stress; lack of learning and development opportunities and unfair promotions were the key factors affecting the morale of health workers in Ghana. Again from the study, working environment was found as the highest and most important non-finacial motivator for health workers. This was followed training and career development: accommodation; job security; promotion, growth and development; recognition, praise and acknowledgement.

The study also revealed that when motivating doctors and nurses or health assistants, the working environment has to be highly considered. Young health care professionals were also found to be highly motivated by training and career development as well as provision of staff accommodation. The study again revealed that female health care workers and older health care professionals highly valued recognition, praise and acknowledgement as an important non-financial motivator.

Overall, the study has shown empirically the state of health worker morale in Ghana and the various factors affecting health worker motivation. This study has also shown the role of non-financial incentives in motivating health workers. Almost all professional groups within the health care sector of Ghana have been considered in the study thereby making the findings representative to all health workers. The analysis of the study results also considered significant demographic variables such as age, years of service, professional background, gender and level of education of respondents. However, this study still had some limitations.

The study was mainly limited by time and financial constraints. As a result, large sample size could not be selected for the study. Notwithstanding the above, since the findings of this study confirm the findings of others conducted in other parts of Ghana and Africa, the

study still has relevance for other health care organisations in Ghana and other developing countries.

#### Recommendations

This section further makes recommendation to all stakeholders involved in health care delivery in Ghana on improving health worker motivation.

As found in the study, working environment was considered as the highest and most important non-financial motivator for health workers. Based on this finding, this study recommends that health policy makers and hospital administrators need to critically improve the physical and social environment of health care organisations.

The study also found training and career development as the second most important motivator for health workers. As a result, this study again recommends that the human resource division of the ministry of health, Ghana, the human resource unit of Komfo Anokye Teaching Hospital and all other stakeholders need to effectively plan and implement comprehensive training and development programmes for all category of health workers. The training and career development programmes should particularly aim at building capacities of young health workers.

The provision of staff accommodation was also valued as the third most significant health worker non-financial motivator. Based on this, the researcher recommends that management of health care organisations need to minimize the payments of end-of-year bonuses and other allowances which has minimal impact on health worker morale but rather focus on using these funds to expand existing housing schemes for health workers. Again, with most young health care professionals indicating they were much this motivated bv accommodation, recommends that health care policy makers need to ensure that newly qualified health care professionals are provided with accommodation.





Although most public health sector workers in Ghana to a large extent have job security, this study further recommends for the strengthening of laws on unlawful dismissals of health workers. This move would protect all health workers to effectively give out their best in the delivery of health care in Ghana.

Again, the study recommends that management of health care organisations need to strengthen employee performance appraisal system so as to ensure that promotions of health workers are fair, equitable and timely.

Also, as a result of most health workers indicating they were motivated by recognition, praise and acknowledgement, this study further recommends that health care organisation need to organize an annual staff awards and prize giving day in honour of hardworking and deserving health workers. Health care managers are also entreated to recognize the day-to-day contributions of health workers towards the delivery of health care in Ghana.

Although this study assesses the role of non-financial incentives on health worker motivation, the study still recognizes the impact of financial incentives on health worker morale. As a result, the researcher recommends for a mix of financial and non-financial incentives in motivating health worker although much emphasis needs to be placed on non-financial incentives.

Furthermore, this study also revealed that one of the reasons why the problem of low health worker motivation in Ghana has not been addressed by government of Ghana and other stakeholders may be partly due to what Mayer & Alexander [59] refers to as the "one-size-fit-all" approach. What works for one health worker may not necessarily work for another health worker. As a result treating all workers in Ghana with the same motivational package may not be effective. Therefore, this study recommends that

motivational packages for health workers in Ghana need to be specifically targeted at the need and interest of particular health worker group rather implementing single motivational package for all health workers.

The researcher further recommends the following for future research in the area of health worker motivation:

- An extensive research to critically examine the specific factors affecting the morale of the various health worker professional groups.
- A combined study to thoroughly examine the effect of various motivators on health worker groups.
- Finally, this study triggers a need for further research into the impact of demographic variables such as age, gender and professional background on the morale of health workers. As a result. the researcher recommends a large scale study to unravel the impact of these demographic variables on health worker motivation. This would also help the Ghana government of and the management of Komfo Anokye Teaching Hospital to align its motivational strategies with these factors for enhanced health worker performance.

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# APPENDICES 1A. Questionnaire

Topic: Health worker motivation in Ghana; the role of non-financial incentives.

| PERSONAL DA' | I.V |
|--------------|-----|

acknowledgement

Job Security

10

| Planca indicata | the following | a by ticking t | he appropriate box |
|-----------------|---------------|----------------|--------------------|

| 1.  | Age 18-29 30-39 40-49 50-59 60+  |  |                  |               |                   |                 |
|-----|--|--|------------------|---------------|-------------------|-----------------|
| 2.  | Gender Male<br>Female  |  |                  |               |                   |                 |
| 3.  | Professional background  |  |                  |               |                   |                 |
|     | Doctor<br>Nurse or Health Ass<br>Biomedical Scientist<br>Pharmacist or Pharr<br>Radiographer or Teo<br>Support Staff | :<br>nacy Technicia                        |                  |               |                   |                 |
| 4.  | Years worked for Komfo Anok<br>Teaching Hospital   | ye 0-9<br>10-19<br>20-29<br>30-39<br>40-49 |                  |               |                   |                 |
| 5.  | Educational level High School<br>Diploma<br>Degree<br>Postgraduate   |  |                  |               |                   |                 |
|     | kindly indicate the extent to whi  | ch you are mot                             | ivated by the fo | ollowing fact | ors in your orga  | anization.      |
| Mo  | otivator   | Highly<br>motivate                         | Motivate         | Neutral       | Lowly<br>motivate | Not<br>motivate |
| Tra | aining and Career development  |  |                  |               |                   |                 |
|     | orking environment   |  |                  |               |                   |                 |
|     | omotion, growth and  |  |                  |               |                   |                 |
|     | velopment  |  |                  |               |                   |                 |
|     | cognition, praise and  |  |                  |               |                   |                 |





| 11 | Accommodation          |  |  |  |
|----|------------------------|--|--|--|
| 12 | Other (Please specify) |  |  |  |

Please kindly indicate the extent to which you agree or disagree with the statement below.

| PI | ease kindly indicate the extent to which you |          | agree with |         |          | 1        |
|----|--|----------|------------|---------|----------|----------|
|    | Statement                                    | Strongly | Agree      | Neutral | Disagree | Strongly |
|    |  | agree    |            |         |          | disagree |
| 13 | Incentives provided by management are        |          |            |         |          |          |
|    | adequate to provide job satisfaction in      |          |            |         |          |          |
|    | this organization                            |          |            |         |          |          |
| 14 | I feel emotionally and physically            |          |            |         |          |          |
|    | drained at the end of every working day      |          |            |         |          |          |
| 15 | I have adequate tools, equipment and         |          |            |         |          |          |
|    | space to assist with the effectiveness of    |          |            |         |          |          |
|    | my work load                                 |          |            |         |          |          |
| 16 | I feel compensated for the services I        |          |            |         |          |          |
|    | render to my organization                    |          |            |         |          |          |
| 17 | Promotions in this organization are          |          |            |         |          |          |
|    | fair, equitable and timely                   |          |            |         |          |          |
| 18 | I feel I work in a safe and good             |          |            |         |          |          |
|    | environment                                  |          |            |         |          |          |
| 19 | My organization provides me enough           |          |            |         |          |          |
|    | opportunities for learning and               |          |            |         |          |          |
|    | development                                  |          |            |         |          |          |
| 20 | I am satisfied with my current pay           |          |            |         |          |          |
| 21 | The skills and training I have are           |          |            |         |          |          |
|    | enough to enable me meet my work             |          |            |         |          |          |
|    | requirements.                                |          |            |         |          |          |
| 22 | Overall, I am satisfied with my job.         |          |            |         |          |          |





### Appendix 1B: Ethical Approval to conduct the study



KWAME NKRUMAH UNIVERSITY OF SCIENCE AND TECHNOLOGY

**COLLEGE OF HEALTH SCIENCES** 

SCHOOL OF MEDICAL SCIENCES / KOMFO ANOKYE TEACHING HOSPITAL

COMMITTEE ON HUMAN RESEARCH, PUBLICATION AND ETHICS

Our Ref: CHRPE/AP/306/14

10th September, 2014.

Mr. Samuel Egyakwa Ankomah %Main Administration Komfo Anokye Teaching Hospital Post Office Box 1934 KUMASI- GHANA.

Dear Sir,

#### LETTER OF APPROVAL

Protocol Title "Health Worker Motivation: The Role of Non-Financial Incentives.

A Case Study of Accident and Emergency Department of Komfo

Anokye Teaching Hospital."

Proposed Site: Accident and Emergency Department, Komfo Anokye Teaching Hospital.

Sponsor: Principal Investigator

Your submission to the Committee on Human Research, Publications and Ethics on the above named protocol refers.

The Committee reviewed the following documents:

- A notification letter of 13th August, 2014 from the Komfo Anokye Teaching Hospital (study site) indicating approval for the conduct of the study in the Hospital.
- A completed CHRPE Application Form.
- Participant Information Leaflet and Consent Form.
- Research Proposal.
- Questionnaire.

The Committee has considered the ethical merit of your submission and approved the protocol. The approval is for a fixed period of one year, renewable annually thereafter. The Committee may however, suspend or withdraw ethical approval at anytime if your study is found to contravene the approved protocol.

Data gathered for the study should be used for the approved purposes only. Permission should be sought from the Committee if any amendment to the protocol or use, other than submitted, is made of your research data.

The Committee should be notified of the actual start date of the project and would expect a report on your study, annually or at the close of the project, whichever one comes first. It should also be informed of any publication arising from the study.

Thank you Sir, for your application.

Yours faithfully,

Osomfuor Prof. Sir J. W. Acheampong MD, FWACI

Chairman

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**Appendix 1C:** 

